### Notifiable Disease Surveillance Monthly Report

### **Metro Public Health Department**

Date: March 25, 2004



### February 2004 Reported Notifiable Diseases at a Glance

	music biscuses	-1	
· ·	Cumulative through February 2004	February 2004	Disease
20	41	19	<b>AIDS</b> * - pages 3 & 4
19	38	15	HIV* - pages 3 & 4
			Sexually Transmitted Diseases - page 3
225	316	173	Chlamydia
132	175	98	Gonorrhea
1	1	1	Primary and Secondary Syphilis
17	17	4	Other Syphilis
3	6	3	Tuberculosis - page 8
			Communicable Diseases ** - pages 5-7
7	2	0	Gastrointestinal Diseases <sup>1</sup>
0	7	2	Hepatitis A
5	9	1	VRE & DRSP <sup>2</sup>
0	0	0	Neisseria meningitidis Disease
			Bacteremia and meningitis caused by:
1	1	0	Haemophilus influenzae
1	2	0	Group A streptococcus
0	0	0	Listeria monocytogenes
0	0	0	Other Bacteria <sup>3</sup>
0	1	1	Other Communicable Diseases <sup>4</sup>
			Vaccine-preventable Diseases**- pages 5 & 7
647	107	3	Influenza-like Illness^
5	1	0	Other <sup>5</sup>
		-	Influenza-like Illness^

<sup>\*</sup>Includes both Davidson County residents and non-Davidson County residents

<sup>\*\*</sup>Presented on this page by event date

<sup>^</sup>Includes cases reported as confirmed and probable

<sup>&</sup>lt;sup>1</sup> Gastrointestinal diseases = campylobacteriosis, *E-coli* 0157:H7, giardiasis, salmonellosis, and shigellosis

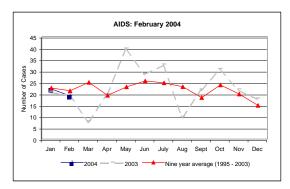
<sup>&</sup>lt;sup>2</sup>VRE = Vancomycin resistant enterococci / DRSP = drug resistant *Streptococcus pneumoniae* 

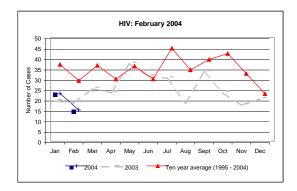
<sup>&</sup>lt;sup>3</sup>See page 9 for a list of bacteria included in this category

 $<sup>^4</sup>$ Includes diseases listed in tables on pages 5 through 7 categorized as "Other"

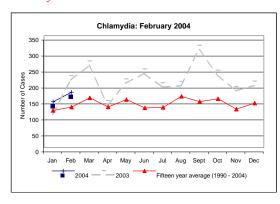
<sup>&</sup>lt;sup>5</sup>Includes diphtheria, measles, mumps, pertussis, and tetanus

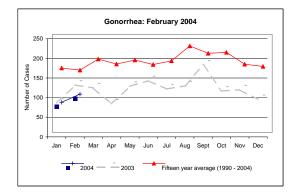
### HIV/AIDS

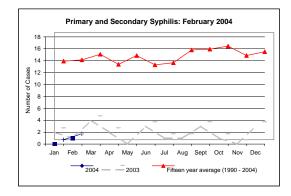




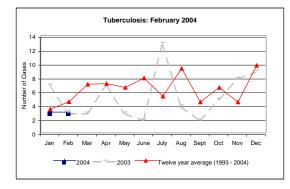
### Sexually Transmitted Diseases

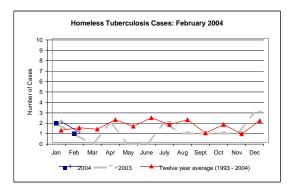




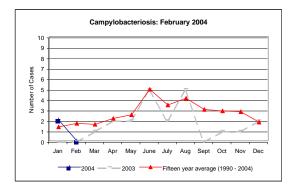


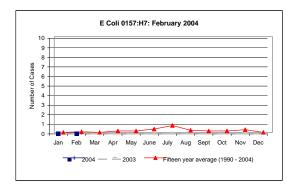
### Tuberculosis

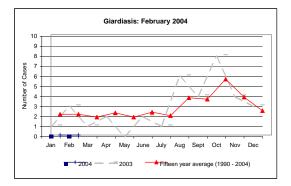


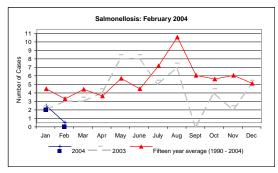


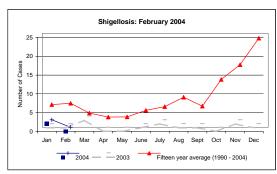
### **Gastrointestinal Diseases**



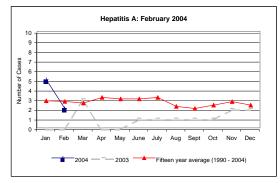


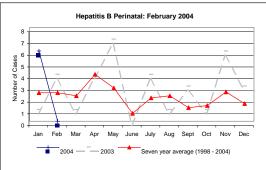


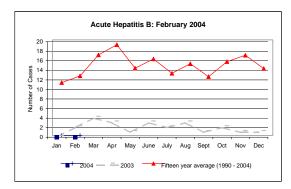


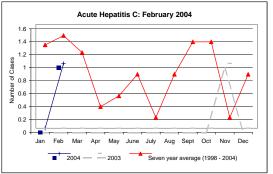


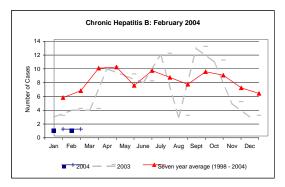
### Hepatitis

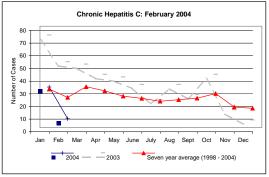




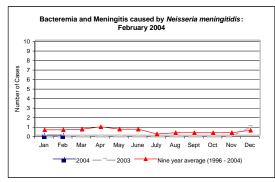


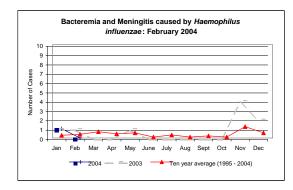


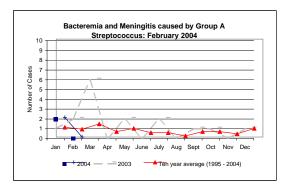


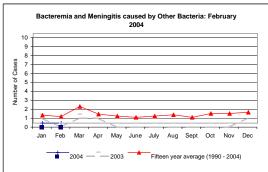


### Meningitis

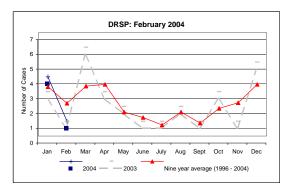


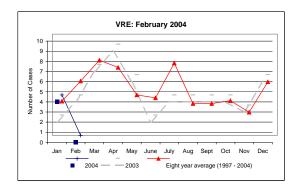




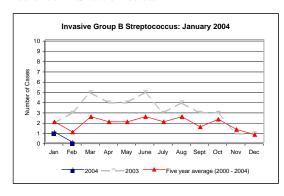


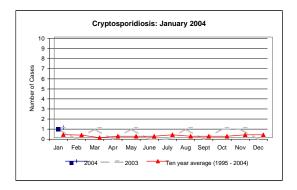
### DRSP and VRE



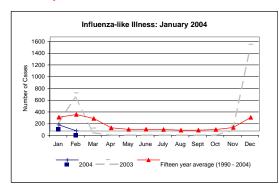


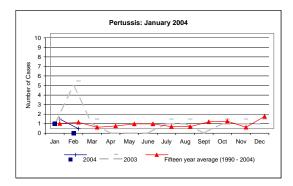
### Other Communicable Diseases





### Vaccine-preventable Diseases





### Notifiable Disease Surveillance Monthly Report: AIDS/HIV/STDs

Month: February, 2004 by Date of Report

Disease	Reported Cases	Dlace	of Diagnosis		D.	ace			Gender		-				Δ.	ge					Previous Year
Disease	Reported Cases						T							1			1	1			
		MHD	Other	White	Black	Other	Unk	Male AIDS/HIV	Female	Unk	<1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2003
						l			·							l	ı				
AIDS*	19		19	12	6	1		15	4					3	7	8	1				20
HIV*	15	5	10	8	6	1		11	4					5	3	5	2				19
								S	exually Tı	ansmitted	l Diseases										
Chlamydia	173	56	117	42	104	3	24	53	120				56	101	13	3					225
Gonorrhea	98	55	43	16	69		13	56	42			1	24	45	17	8	2		1		132
Syphilis, Primary																					
Syphilis, Secondary	1		1		1			1								1					1
Syphilis, Congenital																					
Syphilis, Other	4		4	3	1			2	2					1	2		1				17
Total Syphilis	5	0	5	3	2	0	0	3	2	0	0	0	0	1	2	1	1	0	0	0	18
Total STDs	276	111	165	61	175	3	37	112	164	0	0	1	80	147	32	12	3	0	1	0	375
Syphilis Cases Who Were																					_
Homeless	0							C	lativa th	nough E	ebruary,	9004									0
								Cumu				2004									
						ı	ı		A	IDS/HIV		1	1			ı	1				
AIDS*	41		41	21	18	2		34	7					7	20	11	3				41
HIV*	38	10	28	18	17	3		31	7			1		13	11	9	3	1			39
							1	S	exually Ti	ansmitted	l Diseases	•	•								
Chlamydia	316	119	197	88	185	5	38	106	210				93	187	29	6	1				343
Gonorrhea	175	85	90	30	121	2	22	98	77			1	41	80	33	16	3		1		218
Syphilis, Primary																					
Syphilis, Secondary	1		1		1			1								1					3
Syphilis, Congenital																					
Syphilis, Other	17	1	16	8	9			12	5					4	5	5	3				28
Total Syphilis	18	1	17	8	10	0	0	13	5	0	0	0	0	4	5	6	3	0	0	0	31
Total STDs	509	205	304	126	316	7	60	217	292	0	0	1	134	271	67	28	7	0	1	0	592
Syphilis Cases Who Were Homeless	0																				0

Blank space = No report received

Includes both Davidson County and non-Davidson County residents

# Notifiable Disease Surveillance Monthly Report: AIDS/HIV Davidson County Resident Only Month: February, 2004 by Date of Report

									0 .		U										
Disease	Reported Cases	Place of	Diagnosis		Ra	ace			Gender						A	ge					Previous Year
		MHD	Other	White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2003
									A	AIDS/HI	V										
AIDS	14		14	7	6	1		10	4					3	5	5	1				15
HIV	10	4	6	4	5	1		7	3					4	1	3	2				14
								Cumul	ative Tl	hrough	Februar	y, 2004									
		_		_					A	AIDS/HI	V										
AIDS	32		32	12	18	2		25	7					7	14	8	3				33
HIV	29	9	20	11	16	2		23	6			1		10	8	6	3	1			24

]	Notifiable	Dis	ease S	urve	illan	ce M	onth	ly R	epor	t: A	IDS/	HIV	Non	ı-Da	vids	on C	ount	y Re	side	nt O	nly
					]	Mon	th: F	ebru	ary, i	2004	by I	ate	of Re	por	t						
Disease	Reported Cases	Place of	Diagnosis		R	ace			Gender						A	ge					Previous Year
		MHD	Other	White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2003
									A	IDS/HIV	1										
AIDS	AIDS/HIV 2 3															5					
HIV	5	1	4	4	1			4	1					1	2	2					5
						•		Cumul	ative Tl	rough	Februar	y, <b>2004</b>									
AIDS	9		9	9				9							6	3					8
HIV	9	1	8	7	1	1		8	1					3	3	3					15
Blank space = No report received						•			•												

# Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable Month: February, 2004 by Event Date

Reported Cases Race **Previous Year** Black Other Unk Male Female Unk <1 1-9 10-19 20-29 30-39 40-49 50-59 60-69 70+ Unk</p> White February, 2003 **Gastrointestinal Diseases** Campylobacteriosis E-Coli 0157:H7 3 Giardiasis 3 Salmonellosis Shigellosis 1 Hepatitis A, B, and C 2 1 1 2 1 1 Hepatitis A Hepatitis B 2 -Acute -Chronic 1 1 4 -Perinatal Hepatitis C 1 1 7 3 4 1 2 3 52 -Chronic 5 2 11 2 0 3 0 2 3 0 62 Total **Bacterial Meningitis and Bacteremia** Neisseria meningitidis Disease Bacteremia and meningitis caused by: Haemophilus influenzae Group A Streptococcus Listeria monocytogenes Other Bacteria DRSP/VRE DRSP 1 1 1 1 VRE 4 Total Other Brucellosis 1 0 0 0 0 0 0 0 0 0 0 0 0 Total 0 0 **Total of Communicable Diseases** 13 **76** Vaccine-preventable Diseases Diphtheria Influenza-like Illness 3 3 647\* Measles Mumps 5 Pertussis Tetanus 652

\*Reported as confirmed cases

Blank space = No report received

Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable

**Cumulative Through February, 2004 by Event Date** 

Disease	Reported Cases			ace			Gender		<del>' </del>		<i>J</i>	CIIC I		\ge					Previous Year
Discuse		White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39		50 - 59	60 - 69	70+	Unk	February, 2003
				Other			Gastrointes				10 10	20 20	00 00	10 10	00 00	00 00		CIII	Tebruary, 2000
Campylobacteriosis	2		T		2	1	1				1	1							
E-Coli 0157:H7					2	-	-				-								
Giardiasis																			4
Salmonellosis	2		1		1	1	1						1	1				<del>                                     </del>	5
Shigellosis	2	2			-	1	1			2			-					<del>                                     </del>	2
Total	6	2	1	0	3	3	3	0	0	2	1	1	1	1	0	0	0	0	11
Total		-		·	3			A, B, and		-	-	-	-	-		·	U	L.	
Hepatitis A	7	2	1	2	2	6	1			1	1	2		2	1				
Hepatitis B	,	٤	1	2	L	U	1			-		٤.		٤.	1				
-Acute	1	1	1				1						1						2
			+										1						
-Chronic -Perinatal	2	$\vdash$	+		6	1	1					•		2					7
	6				ь		6				1	3	2						5
Hepatitis C						-													
-Acute	1		10		1	1	4-		_				1	40		_		$\vdash$	407
-Chronic	39	26	12		1	24	15	_				1	7	18	11	1	1		125
Total	56	29	13	2	12	32	24	0	0	1	2	6	11	22	12	1	1	0	139
			_			Bacter	ial Mening	gitis and B	acteremi	a	l	I			I		I		
Neisseria meningitidis Disease																			
Bacteremia and Meningitis caused by:																			
Haemophilus influenzae	1	1				1											1		2
Group A Streptococcus	2	1	1			1	1							1			1		2
Listeria monocytogenes																			
Other Bacteria																			1
Total	3	2	1	0	0	2	1	0	0	0	0	0	0	1	0	0	2	0	5
							DRS	SP/VRE											
DRSP	5	4			1	2	2	1		1		1		1		1	1		4
VRE	4		4				4					1		1			2		6
Total	9	4	4	0	1	2	6	1	0	1	0	2	0	2	0	1	3	0	10
							C	Other											
Brucellosis	1				1	1									1				
Total	1	0	0	0	1	1	0	0	0	0	0	0	0	0	1	0	0	0	0
Total of Communicable D'	75	977	10		17	40	0.4		0	4			10	00	10				105
Total of Communicable Diseases	75	37	19	2	17	40 Va	34 ccine-prev	1 entable Di		4	3	9	12	26	13	2	6	0	165
Diphtheria	1					Va	cine-prev	chable D	scases										
•	107*		+		107			107										107	004*
Influenza-like Illness	107*	$\vdash$	+		107			107										107	864*
Measles	<del>                                     </del>		+															+	
Mumps												1						$\vdash$	
Pertussis	1	1				1			1									$\vdash$	6
Tetanus																			
*Reported as confirmed cases	108	1	0	0	107	1	0	107	1	0	0	0	0	0	0	0	0	107	870

\*Reported as confirmed cases

Blank space = No report received

## Notifiable Disease Surveillance Monthly Report: Hepatitis Risk Factors

Month: February, 2004 by Event Date

					J	,	J	LVCI											
Risk Factor	Reported Cases	Information Not Available*		Ra	ace			Gender						A	ge				
			White	Black	Other	Unk		Female	Unk	<1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk
					Н	epatitis A	١.												
During the 2 - 6 weeks prior to illness:																			
Child/employee daycare																			
Household contact to child in daycare																			
Contact to case																			
Sexual																			
Household																			
Other																			
Foodhandler																			
Consume raw shellfish																			
Part of common-source outbreak																			
Travel																			
South/Central America																			
Africa																			<b></b>
Caribbean																			<b></b>
Middle East																			
Asia/South Pacific																			
Australia/New Zealand																			
Other																			
Duration																			
1 - 3 Days																			
4 - 7 Days																			
More than 7 Days																			
Total Reported Cases	2	0																	
Hepatitis B																			
During the 6 weeks - 6 months prior to illness:																			
Contact to case																			
Sexual																			<b></b>
Household																			<del></del>
Other																			
Employed in medical/dental field																			<b>!</b>
Receive blood products																			
Associated with dialysis or kidney transplant unit																			
Inject street drugs																			'
Sexual Preference																			
Heterosexual																			
Homosexual																			
Bisexual																			
Unknown																			
Number of sex partners																			
None																			
One																			
2 - 5																			
More than 5																			
Unknown																			
Dental surgery																			<b></b>
Other surgery																			1
Acupuncture				ļ												ļ			1
Tattoo																			<b></b>
Accidental needle stick																			<b></b>
Object contaminated with blood																			
Received 3 dose hepatitis B series																			
Yes																			
No				l											L	l			
Total Reported Cases  *When the NETSS field for a specific risk factor is blank (not marked	0																		

When the NETSS field for a specific risk factor is blank (not marked yes or no), that case will be reflected in the count for this column. Information provided only when case answered positively for the respective risk factor.

### Notifiable Disease Surveillance Monthly Report: Hepatitis Risk Factors **Cumulative through February, 2004 by Event Date**

		Cumulat			<b>5</b> `				<i>-</i>										
Risk Factor	Reported Cases	Information Not Available*		Ra	асе			Gender						A	ge				
			White	Black	Other	Unk	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk
						epatitis A													
During the 2 - 6 weeks prior to illness:																			
Child/employee daycare	1			1				1					1						
Household contact to child in daycare																			
Contact to case																			
Sexual																			
Household	1				1		1				1								
Other																			
Foodhandler																			
Consume raw shellfish																			
Part of common-source outbreak																			İ
Travel																			
South/Central America																			
Africa																			1
Caribbean																			
Middle East																			
Asia/South Pacific																			
Australia/New Zealand																			
Other	1				1		1				1								
Duration																			
1 - 3 Days																			
4 - 7 Days																			
More than 7 Days					1		1				1								
Total Reported Cases	7	2																	
-					Н	epatitis I	3												
During the 6 weeks - 6 months prior to illness:																			
Contact to case																			
Sexual																			
Household																			
Other																			
Employed in medical/dental field																			
Receive blood products																			
Associated with dialysis or kidney transplant unit																			
Inject street drugs	1		1					1						1					1
Sexual Preference																			
Heterosexual	1		1					1						1					
Homosexual																			
Bisexual																			
Unknown																			
Number of sex partners																			
None																			
One	1		1					1						1					
2 - 5																			
More than 5																			
Unknown																			
Dental surgery																			
Other surgery																			
Acupuncture																			
Tattoo																			
Accidental needle stick																			
Object contaminated with blood																			
Received 3 dose hepatitis B series																			
Yes																			
No																			
Total Reported Cases	1	0																	
*When the NETSS field for a specific risk factor is blank (not marked	yes or no), that c	ase will be reflected in th	e count for t	his column															

\*When the NETSS field for a specific risk factor is blank (not marked yes or no), that case will be reflected in the count for this column. Information provided only when case answered positively for the respective risk factor.

# Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable Month: February, 2004 by Date of Report

	Demonted Corre							J,		, –	OI NO	- F							n
Disease	Reported Cases	White	Black	Other	Unk	Male	Gender Female	Unk	<1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	Previous Year February, 2003
		wine	DIACK	Other	UIIK	iviale		Gastrointe			10-13	20-23	30 - 39	40 - 43	30 - 39	00-03	707	UIIK	rebluary, 2003
Campylobacteriosis	<u> </u>																		
E-Coli 0157:H7																			
Giardiasis																			1
			1																2
Salmonellosis	1		1			1							1						1
Shigellosis Total	1	0	1	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	4
Total	1	U	1	U	U	1	U		s A, B, and		U	U	1	U	U	U	U	U	4
Hamatitia A	2	1			1	2		Tiepatiti	S A, D, and		1	l		1	I	l			
Hepatitis A	z	1	L			Z		L		1	1			1					
Hepatitis B	1	1					1				1	I	1	1		I	I		
-Acute		1					1												
-Chronic -Perinatal	3				3	1						2		1					1
	3				3		3					z	1						
Hepatitis C																			
-Acute	1	23	10		1	22	10						6	10					
-Chronic	34 42		10 10	0	7	26	12 16		0	0	1	2	9	17 19	9	1	1	0	18 19
Total	42	25	10	U	7	26		0 erial Menin			1	Z	9	19	9	1	1	U	19
Neisseria meningitidis Disease	l						Datte	iai weiiii	gitis and D	acterenna									
Neisseria meningitiuis Disease										1	<u> </u>	ļ	-	L	-	ļ		_	
Bacteremia and meningitis caused by:																			
Haemophilus influenzae	1	1					1										1		1
Group A Streptococcus																			
Listeria monocytogenes																			
Other Bacteria																			1
Total	1	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2
								DR	SP/VRE										
DRSP	2	1			1		1	1		1							1		1
VRE	4		4				4					1		1			2		1
Total	6	1	4	0	1	0	5	1	0	1	0	1	0	1	0	0	3	0	2
								(	Other										
Invasive Group B Streptococcus	1	1					1								1				2
Brucellosis	1				1	1									1				
Total	2	1	0	0	1	1	1	0	0	0	0	0	0	0	2	0	0	0	2
Total of Communicable Diseases	52	28	15	0	9	28	23	1	0	1	1	3	10	20	11	1	5	0	29
				<del>                                     </del>			v	accine-prev	entable Di	seases									
Diphtheria													-						
Influenza-like Illness	3*		-		3			3					-		-			3	773*
Measles																			
Mumps																			
Pertussis	1	1				1			1										
Tetanus																			
Total	4	1	0	0	3	1	0	3	1	0	0	0	0	0	0	0	0	3	773

Blank space = No report received

\*Reported as confirmed cases

## Notifiable Disease Surveillance Monthly Report: Communicable Disease/Vaccine-Preventable Cumulative Through February, 2004 by Date of Report

Disease	Reported Cases	1	R	ace		10	Gender	11001	uaiy, ≈t	,,,,,	<i>y</i> 24.	01 1		.ge					Previous Year
	· · · · · · · · · · · · · · · · · · ·	White	Black	Other	Unk	Male	Female	Unk	<1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	February, 2003
	•	•				•		Gastrointe	stinal Diseases	3									
Campylobacteriosis	3	1			2	1	2				1	1		1					
E-Coli 0157:H7																			
Giardiasis																			1
Salmonellosis	2		1		1	1	1						1		1				3
Shigellosis	2	2				1	1			2									1
Total	7	3	1	0	3	3	4	0	0	2	1	1	1	1	1	0	0	0	5
								Hepatiti	s A, B, and C										
Hepatitis A	7	2	1	2	2	6	1			1	1	2		2	1				
Hepatitis B								•			•				•				
-Acute	1	1					1						1						
-Chronic	2				2	1	1							2					1
-Perinatal	6				6		6				1	3	2						
Hepatitis C																			
-Acute	1				1	1							1						
-Chronic	39	26	12		1	24	15					1	7	18	11	1	1		18
Total	56	29	13	2	12	32	24	0	0	1	2	6	11	22	12	1	1	0	19
							Bacte	erial Menin	gitis and Bacte	remia									
Neisseria meningitidis Disease																			
D																			
Bacteremia and Meningitis caused by:  Haemophilus influenzae							1	I						I			1		1
Group A Streptococcus	2	1	1			1	1							1			1		1
Listeria monocytogenes	۷	1	1			1	1							1			1		1
Other Bacteria																			1
Total	3	2	1	0	0	1	2	0	0	0	0	0	0	1	0	0	2	0	3
Total	3	- 2	1	U	U		L		SP/VRE		U	U	U	1	U	U	2	U	<u>_</u>
DRSP	5	4			1	2	2	1		1		1		1		1	1		3
VRE	4	-	4		-		4	-				1		1		-	2		1
Total	9	4	4	0	1	2	6	1	0	1	0	2	0	2	0	1	3	0	4
1041	<u> </u>		*	•					Other				•						*
Brucellosis	1				1	1									1				
Invasive Group B Streptococcus	1	1			-		1								1				2
Total	2	1	0	0	1	1	1	0	0	0	0	0	0	0	2	0	0	0	2
								_				_				_			
Total of Communicable Diseases	77	39	19	2	17	39	37	1	0	4	3	9	12	26	15	2	6	0	33
			1				v	accine-prev	entable Diseas	es		ı				ı			
Diphtheria																			
Influenza-like Illness	112*				112			112										112	773*
Measles																			
Mumps																			
Pertussis	1	1				1			1										1
Tetanus																			
*Reported as confirmed cases	113	1	0	0	112	1	0	112	1	0	0	0	0	0	0	0	0	112	774

\*Reported as confirmed cases Blank space = No report received

### Notifiable Disease Surveillance Monthly Report: Tuberculosis Month: February, 2004 by Date of Report

New Extrapulmonary Cases  New Cases in Dual Sites  New Homeless Cases  1 Total New Cases  3	1 1 3	MHD	Other 2	White Non-Hisp 2	Black Non-Hisp	Hispanic Na	ask. Asian/Pa															
New Extrapulmonary Cases  1 New Cases in Dual Sites New Homeless Cases  1 Total New Cases  3 Total Cases  5	1			2				Other	Male	Female	Unk	< 1	1-9	10 - 19	20 - 29	30 - 39	40 - 49	50 - 59	60 - 69	70+	Unk	
New Cases in Dual Sites  New Homeless Cases  1  Total New Cases  3  Total Cases  5	1		1						1	1			1						1			
New Homeless Cases 1 Total New Cases 3 Total Cases 5					1					1						1						
Total New Cases 3  Total Cases 5																						
Total Cases 5	3		1	1					1										1			Total New Cases
			3	2	1				1	2			1			1			1			February 2003: 3
				-					Cumulati	ve Through	ı February,	2004										
										Pulmon	ary											
Total Cases 1	5	1	4	3	2				4	1			1				2	1	1			
Total Cases 1				•		,	•	<u> </u>	-	Extrapulme	onary											
•	1		1		1					1						1						
	•			•	!	-			•	Dual Si	tes								!			
Total Cases																						
	•			•		l			•	All Site	es		l							l		
Total Cases 6	6	1	5	3	3				4	2			1			1	2	1	1			
	3	1	2	2	1				3								1	1	1			
Total Drug-resistant Cases																						Cumulative Total Thru
Total Multi-drug resistant Cases																						February 2003: 10
Total Cases with HIV Co-	1		1		1				1								1					
Total Cases Foreign Born < 5 Years	-		-		-												•					
Total Cases Foreign Born > 5 Years 1			1		1			+		1						1						

Blank space = No report received

### **Definitions and Technical Notes**

1. Human Immunodeficiency Virus (HIV) / Acquired Immunodeficiency Syndrome (AIDS): Effective January 1, 2000, the Centers for Disease Control & Prevention (CDC) has established a new case definition for HIV infection in adults and children that includes revised surveillance criteria for HIV infection and incorporates the surveillance criteria for AIDS. For adults and children aged  $\geq$  18 months, the HIV surveillance case definition includes laboratory and clinical evidence specifically indicative of HIV infection and severe HIV disease. For children aged <18 months (except for those who acquired HIV infection other than by perinatal transmission), the HIV surveillance case definition updates the definition in the 1994 revised classification system. The revised case definition includes HIV nucleic acid (DNA or RNA) detection tests and permits reporting of cases based on the result of any test licensed for diagnosing HIV infection in the U.S. The entire case definition may be found in MMWR, December 10, 1999 / Vol.48 / No. RR-13.

Effective January 1, 1993, the CDC expanded the AIDS surveillance to include all HIV infected adolescents and adults aged greater than or equal to 13 years who have either a) less than 200 CD4+ T-lymphocytes/uL; b) a CD4+ T-lymphocyte percentage of total lymphocytes of less than 14%; or c) any of the following three clinical conditions: pulmonary tuberculosis, recurrent pneumonia, or invasive cervical cancer. The expanded definition retained the 23 clinical conditions in the AIDS surveillance case definition published in 1987.

- 2. <u>Sexually Transmitted Diseases (STDs)</u>: Sexually transmitted diseases are infections one can acquire by having sex (vaginal, oral, and/or rectal) with another who has the infection. Viruses or bacteria can cause STDs. Although there are many types of STDs, only HIV/AIDS, chlamydia, gonorrhea, and syphilis are required to be reported to the health department and are presented in this report. HIV/AIDS cases are tabulated separately from other STDs for programmatic reasons.
- 3. <u>Communicable/Vaccine-preventable Diseases</u>: Communicable diseases in this report are a selected group of notifiable diseases that are reported to the Metropolitan Health Department of Nashville and Davidson County (MHD) regularly (other than AIDS/HIV, STDs, and TB). Other communicable diseases not listed in this report may be added as needed. Communicable diseases make up the largest portion of notifiable diseases, which are diseases that are required by law to be reported to the health department. Diseases that can be prevented by immunization include influenza, measles, mumps, polio, rubella (German measles), pertussis, diphtheria, tetanus, *Haemophilus influenzae* type b, hepatitis B, varicella (chickenpox), and others. Influenza, measles, diphtheria, mumps, pertussis, and tetanus are the six vaccine-preventable diseases listed regularly in this report, although others may be included as needed.
- 4. <u>Tuberculosis</u>: A chronic bacterial infection caused by <u>Mycobacterium tuberculosis</u> (MTB), characterized pathologically by the formation of granulomas. The most common site of infection is the lung, but other organs may be involved. A verified case of TB is a case that has laboratory confirmation of <u>Mycobacterium tuberculosis</u> (i.e., positive culture for MTB) or, in the absence of laboratory confirmation, a case that meets the clinical case definition. A clinical case meets all of the following criteria: 1.) It has a positive tuberculin skin test. 2.) Other signs and symptoms compatible with tuberculosis (e.g., an abnormal, unstable [i.e., worsening or improving] chest radiograph, or clinical evidence of current disease are present. 3.) There is treatment with two or more antituberculosis medications. 4.) A completed diagnostic evaluation. Because verification of a tuberculosis case according to the case definition as described above requires 6 8 weeks or longer, a case may be reported to the Tennessee Department of Health (TDOH) and presented in this report one to two months or longer after evaluation and care was initiated for the case. Following evaluation for tuberculosis, some persons are determined to not have a laboratory confirmation of MTB or to meet the clinical case definition for the disease, and are therefore not reported to the TDOH.

A TB case should not be counted twice within any consecutive 12-month period. However, cases in which the patients had previously had verified disease should be reported again if the patients were discharged from treatment. Cases also should be reported again if patients were lost to supervision for greater than 12 months and disease can be verified again. Mycobacterium diseases other than those caused by M. tuberculosis complex should not be counted in tuberculosis morbidity statistics unless there is concurrent tuberculosis. (Centers for Disease Control & Prevention case definition).

Information pertaining to tuberculosis cases who were homeless is provided beginning in December, 2000. Homeless is defined as:

- (1) An individual who lacks a fixed, regular, and adequate nighttime residence; or
- (2) An individual who has a primary nighttime residence that is:
  - (a) A supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill); or
  - (b) An institution that provides a temporary residence for individuals intended to be institutionalized; or
  - A public or private place not designated for, or ordinarily used as, a regular sleeping accommodation for human beings.

A homeless person may also be defined as a person who has no home, e.g., is not paying rent, does not own a home, and is not steadily living with relatives or friends. Another definition is a person who lacks customary and regular access to a conventional dwelling or residence. Included as homeless are persons who live on streets or in nonresidential buildings. Also included are residents of homeless shelters, shelters for battered women, welfare hotels, and single room occupancy (SRO) hotels which are not designated for permanent long-term housing. The term homeless is applied to any patient who meets the definition of homeless at any time during the 12 months prior to the time when the TB diagnostic evaluation was performed. (Definition from the TIMS User's Guide).

- 5. <u>Surveillance</u>: Continuous analysis, interpretation, and feedback of systematically collected data, generally using methods distinguished by their practicality, uniformity, and rapidity rather than by accuracy or completeness. By observing trends in time, place and persons, changes can be observed or anticipated and appropriate action, including investigative or control measures, can be taken. Sources of data may relate directly to disease or to factors influencing disease. Thus they may include (1) mortality and morbidity reports based on death certificates, hospital records, general practice sentinels, or notifications; (2) laboratory diagnoses; (3) outbreak reports; (4) vaccine utilization-uptake and side effects; (5) sickness absence records; (6) disease determinants such as biological changes in agent, vectors, or reservoirs; (7) susceptibility to disease, as by skin testing or serological surveillance (e.g., serum banks). This definition was taken from "A Dictionary of Epidemiology" third edition, edited by John M. Last, and published in 1995.
- 6. Event Date: Event date is defined as the earliest known date associated with the incidence of the disease. This date may be the date of disease onset, the date of clinical diagnosis, laboratory diagnosis, report to county health department, report to state health department, or as a last resort, any date associated with the case. For purposes of this report, event date is the date of laboratory diagnosis.
- 7. Report Date: Report date is defined as the date that the disease was reported to the Tennessee Department of Health. The report date is always a Saturday. For example, diseases displayed in this report by report date reflect those cases reported to the Tennessee Department of Health from the week ending the second Saturday of the month of the report to the week ending the first Saturday of the current month.

- 8. NETSS: National Electronic Transmitting Surveillance System
- 9. <u>TIMS</u>: Tuberculosis Information Management System
- 10. HARS: HIV/AIDS Reporting System
- 11. Cumulative totals for STD's, communicable diseases and vaccine-preventable diseases represent only the totals in 1999 and 2000 through the respective month being reported on in 1999 and 2000.

### 12. HIV/AIDS/STD data:

- ♦ Provided by: Dan McEachern, Division of STD Control, and Nancy Horner
- ♦ Date: March 25, 2004 and March 3, 2004.
- ♦ Data Source: STD cases entered into the NETSS database by report date.
- ♦ HIV/AIDS cases entered into the HARS database during the calendar month of the report.
- ♦ Please note: Number of cases of HIV/AIDS may include both Davidson County residents and non-Davidson County residents. Resident vs. non-resident status is indicated page ten. STD data presented is Davidson County resident data only.

### 13. Communicable/Vaccine-preventable diseases data:

- ♦ The data used to prepare the Communicable/Vaccine-preventable Diseases portion of this report were downloaded from NETSS on March 1, 2004 at the Metropolitan Health Department of Nashville and Davidson County by Nancy Horner, Division of Epidemiology.
- ♦ Data presented is Davidson County resident data only.

In June 2000, changes were made in how bacterial meningitis and bacteremia are presented in the report. These changes were made to 1) make the data more easily interpreted and 2) to more closely represent the manner in which the diseases are reported to CDC through NETSS. The NETSS event numbers used to report these bacteria to the CDC include both cases of meningitis and bacteremia caused by the bacteria. In order to determine whether a reported case is meningitis or bacteremia requires entry into the secondary screens of the NETSS system where laboratory specifics are entered, such as 1) specimen from which the organism was isolated (blood, cerebrospinal fluid, pleural fluid, peritoneal fluid, pericardial fluid, joint, placenta, amniotic fluid, and other) and 2) type of infection caused by the organism (primary bacteremia, meningitis, otitis media, pneumonia, cellulitis, epiglottitis, peritonitis, pericarditis, septic abortion, amnionitis, septic arthritis, conjunctivitis, other); and 3) serogroup. This report will provide only the total numbers for the represented categories. For specific information pertaining to numbers of bacterial meningitis vs. bacteremia, contact Pam Trotter at Ext. 632.

The bacteria included in the "Other Bacteria" category include: Group B streptococcus, *Streptococcus pneumoniae*, Escherichia coli, *Staphylococcus aureus*, *Staphylococcus epidermidis*, *Klebsiella* species, Enterobacter species, *Serratia* species, Actinobacter species, Group D streptococcus, and other streptococcus.

### 14. Tuberculosis data:

- ♦ Data pertaining to numbers of drug-resistant cases provided by Division of Tuberculosis Elimination.
- ◆ Date:
- ♦ Nancy Horner, Division of Epidemiology, ran the tuberculosis data from the TIMS database on March 3, 2004.
- ♦ Data Source: TIMS. Tuberculosis cases presented in this report reflect surveillance of new cases based on calendar month of report.
- Please note: Cases presented are primarily Davidson County residents, but may include some cases diagnosed, treated, and managed in Davidson County but residing in another county. Those cases not Davidson County residents will be so indicated on the report.

Because determination of drug/multi-drug resistance may require as long as 2 months, beginning with the October 2001 report this information will presented only as cumulative data. Similarly, HIV reports may not be available to accurately reflect by month the HIV status of each case so HIV Co-infection status will presented as cumulative data only.

In September of 2001, maps were added to the report. The maps are geographical representation of individual cases of diseases. The maps are produced using ArcView GIS Version 3.0.

In May of 2002, information pertaining to risk factors for hepatitis A and B were added to the report.